

 NORFOLK Department of Police	Operational General Order – ADM-335: Infectious Disease Control		
	Office of Preparation: Office of Support Services (mar)		
	CALEA:	None	
	VLEPSC:	None	
LEGAL REVIEW DATE:	November 8, 2016	PRESCRIBED DATE:	November 22, 2016
City Attorney:	<i>[Signature]</i>	City Manager/Director of Public Safety:	<i>[Signature]</i>
APPROVED BY THE AUTHORITY OF THE CHIEF OF POLICE:		<i>[Signature]</i>	

Purpose:

The purpose of this order is to outline the policies and procedures related to infectious disease control.

Policy:

The policy for infectious disease control is established to minimize the risk of contracting infectious diseases while performing duties as an employee of the Department of Police. All employees will follow established procedures when contacting persons suspected of being infected with a contagious disease or handling objects that are suspected of being contaminated with infectious organisms.

Supersedes:

1. G.O. ADM-335: Infectious Disease Control, dated May 14, 2009
2. Any previously issued directive conflicting with this order

Order Contents:

- I. Responsibilities
- II. Exposure Procedures
- III. Disposal of Contaminated Materials
- IV. Medical Care, Monitoring, and Reporting
- V. Record Keeping
- VI. Testing of Source Persons for Bloodborne Pathogens

I. Responsibilities

A. Employee responsibility

Each employee is responsible for following the policies and procedures outlined in this order and in the Blood Pathogens section of the City of Norfolk Safety Manual, located: http://intranet/hr/safety/Documents/Safety_Manual.pdf.

B. Training Division responsibility

1. The commanding officer of the Training Division is responsible for providing the necessary training in infectious disease recognition, prevention, and protection. Records will be maintained on all related training.
2. Training that will meet or exceed OSHA requirements will be provided to all sworn personnel and selected civilian employees during the basic Norfolk Police Academy session and at least annually thereafter.

C. Department responsibility

The commanding officer of the Office of Support Services is the designated officer for this program and will maintain all reports of exposure prepared in accordance with Section V. of this order.

1. The department will make the Hepatitis B Vaccine series available to police recruits, new hires from other police departments, and all employees who have a potential for occupational exposure, within 10 days of their hire date. Personnel presenting medical records of prior vaccination will not be vaccinated. Boosters will be provided according to Center for Disease Control (CDC) guidelines.
 - a) Vaccinations will be provided at no cost to the employee at a reasonable time and place under the supervision of a licensed physician or licensed health care professional, and according to the latest recommendations of the U.S. Public Health Service.
 - b) Personnel are under no obligation to undergo the vaccinations. Those who elect to forgo the vaccinations will be required to prepare and submit a Disability Management Refusal of Medical Treatment or Observation Form. It should be noted, however, that persons who decline may elect to undergo the series of vaccinations at no cost at a later date.

2. The following job classifications are positions in which all employees may be exposed to infectious disease while performing routine police duties with the potential for occupational exposure:
 - a) Police officers
 - b) Humane officers
 - c) Identification clerks
 - d) School crossing guards
 - e) Operations officers
 - f) Stenographic reporters
3. The officer in charge (OIC) of the Property and Evidence Unit is responsible for ensuring that an adequate supply of disease prevention materials and sufficient antiseptic/germicidal solutions are available for issue.
4. Commanding officers will ensure that employees collect, bag, and transport contaminated waste to the Public Health Department for disposal in accordance with local, state, and federal regulations.

II. Exposure Procedures

A. Hygiene and cleaning practices

1. Hand washing is a first line of defense for infectious disease control. Hands should be washed frequently.
2. The following cleaning solutions are effective against infectious diseases:
 - a) Personal hygiene
 - (1) Soap and water – used for removing transient micro-organisms acquired by direct or indirect contact on the skin. Soap and water provide an effective means of self-protection and should be used, preferably in place of other skin cleansing solutions.
 - (2) Infectious disease wipes – disposable wipes, as supplied by the department, should be used when soap and water are not readily available for cleansing the skin. When soap and water become available, the skin should be cleansed immediately.
 - b) Inanimate objects
 - (1) Household bleach – a solution of 1 part sodium hypochlorite (household bleach) and 9 parts water is effective for cleaning counter tops and other surfaces that are contaminated with blood or other body fluids. This solution must be prepared on a

daily basis because it is unstable and deteriorates rapidly. Care should be taken not to expose uniforms or clothing to the bleach solution; bleach will remove color from most fabrics.

- (2) Disinfectants – disinfectants that have a chemical germicide registered with the Environmental Protection Agency such as a hospital disinfectant labeled “tuberculocidal” should be used according to manufacturer’s directions to clean equipment, counter tops, or other surfaces that may have been contaminated with blood or other body fluids.

B. Employee contact procedures

Suspects will sometimes falsely state that they are infected as a method to dissuade employees from carrying out necessary or precautionary law enforcement activities.

1. When dealing with a person(s) suspected of having infectious tuberculosis, personnel will wear the issued respirator. Additionally, vehicles carrying such persons should be ventilated by lowering the front windows and leaving the prisoner shield window closed while driving. After removing the subject, open all doors and ventilate at least 10 minutes before operating the vehicle.
2. Personal Protective Equipment (PPE), i.e., masks, gloves, gowns, etc., is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or come in contact with employee work clothes, undergarments, street clothes, skin, eyes, mouth, or any mucous membranes under normal conditions of use.
 - a) Use of PPE is enforced unless the employee, exercising professional judgment, declines to use it if circumstances are such that the use may prevent public safety services, or the use would pose an increased hazard to the safety of the employee or fellow employees.
 - b) When an employee elects not to use the required PPE, the circumstances will be investigated by the employee’s immediate supervisor and documented using the Employee Failure to Use the Required PPE reporting form and forwarded to the designated officer via the chain of command.
 - c) PPE, if used, will be removed as soon as possible upon leaving the scene and placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.

3. Suspects or persons believed to have infectious tuberculosis will not be brought to a City-owned facility, but will instead be taken immediately to the nearest hospital for isolation, diagnosis, and treatment.
4. The number of persons who come in contact with the individual believed to be infectious, must be limited to those essential for incident resolution.
5. Additional persons on the scene who may come in contact with infectious persons or objects must be advised of the potential for exposure.
6. Anyone experiencing an exposure incident to blood or body fluids should immediately advise the supervisor and seek medical treatment. The Employee Infectious Disease Exposure Report included in ILD packets will be used for reporting the incident.
7. An adjunct respiration device will be used to perform artificial ventilation whenever possible.
8. Employees will take special precautions when dealing with subjects displaying combative behavior, to avoid being bitten or potential exposure to sharp instruments.
9. Surgical caps, hoods, and/or shoe covers or boots are to be worn in instances when gross contamination can be reasonably anticipated.

C. Evidence handling procedures

Searches and evidence handling will be performed with caution. Puncture wounds and needle sticks pose a serious hazard. The following precautions should be taken to reduce the risk of infection:

1. Caution should be used when searching the clothing of suspects. A thorough "pat down" is advisable prior to an actual search. Individual discretion, based on the circumstances, should be utilized when determining if it is appropriate for the suspect or prisoner to empty his/her own pockets under close observation and direction of the officer.
2. If cotton gloves are to be worn when working with evidence of potential latent fingerprint value at a crime scene, they may be worn over protective disposable gloves when exposure to blood may occur.
3. Care should be exercised when searching hidden areas such as under car seats.
4. If searching a purse, carefully empty contents directly by turning it upside down over a table or other flat surface after a visual inspection.

5. Use puncture-proof containers to store sharp instruments and clearly marked plastic bags to store other possible contaminated items.
6. To avoid tearing gloves, use transparent tape instead of metal staples to seal evidence.
7. When possible, evidence should be air-dried before sealing.
8. Only items of evidentiary value to the prosecution of criminals will be collected from the medical examiner.
9. Recovery and disposal of syringes.
 - a) All syringes will be recovered utilizing disposable medical style gloves. The syringe(s) will be placed in a Sharps Shuttle and the cap will be properly closed.
 - b) Sharps Shuttles, containing syringes that are not evidence, will be placed in a biohazard receptacle (Section IV.C.). These syringes will not be placed on a voucher and sent to Property and Evidence.
 - c) Syringes recovered as evidence will be placed in a Sharps Shuttle, sealed with tape, and initialed. The Sharps Shuttle will be placed in a plastic or paper envelope that will be marked "biohazard" in red ink or affixed with a standard biohazard symbol, and the envelope sealed according to established procedures. When sent to the lab for testing, established procedures will be followed.
 - d) The Vice and Narcotics Division may procure and utilize appropriate puncture proof containers for handling large quantities of syringes. These containers must be appropriately marked as "biohazard." Commands or units needing assistance in disposing large quantities of syringes may contact the Vice and Narcotic Division.

III. Disposal of Contaminated Materials

- A. The City of Norfolk will provide for the decontamination, cleaning, laundering, and disposal of required PPE. Additionally, personnel listed in Section I.C.2 must maintain a change of clothing at the work site in the event of contamination with blood or body fluids. Under no conditions will contaminated clothing be worn to the homes of employees or other places after the workday is complete.

Recovered syringes of non-evidentiary value will be disposed of in a department-issued biohazard container and placed in a biohazard receptacle. Biohazard receptacles are placed at locations listed in Section C. below.

B. When clothing becomes soiled by contact with body fluids, employees will take the following action:

1. Place the contaminated garments in a properly marked, water soluble plastic bag(s), (available at the Central Desk, Property and Evidence Unit or Patrol Divisions), then place them in a properly marked biohazard bag and deliver them to the contract laundry service (Attachment A).
2. Upon arrival at the laundry service, employees are directed to follow the vendor's procedures for pick-up and delivery. It is the employee's responsibility to retrieve the decontaminated garments from the laundry upon notification that the garments are ready for pick-up.

C. Specially marked containers to collect other contaminated materials are available at the locations listed below:

1. Central Desk area in Police Operations Center (POC)
2. Property and Evidence Unit
3. Identification Section, POC
4. Inside sally port, POC
5. Third Patrol Division
6. Second Patrol Division
7. K-9/Pistol Range
8. Police Administration Building
9. First Patrol Division
10. Detective Division
11. Vice and Narcotics Division
12. Warrant Unit
13. All Norfolk fire stations

The commanding officer of each division issued a biohazard receptacle will ensure the contents are disposed of weekly by having the biohazard bag delivered to the lab at the Public Health Department.

D. The police department will repair or replace PPE as needed to maintain its effectiveness. A universal precaution kit containing various PPE, a CPR one-way valve mask, and a Sharps Shuttle(s) will be maintained in each vehicle and bicycle assigned to the Police Department.

1. In addition to the items listed above, forensics investigators, homicide investigators, and ID clerks will have available to them the following:

- a) Disposable jumpsuits
 - b) Disposable foot covers
 - c) Operating room styled head covers
 - d) Lab coats
- 2. All personnel listed in Section I.C.2 (except d.) will be issued an appropriate disposable respirator.
- 3. Commanding officers may identify those special purpose vehicles not requiring the above items and retain the excess for restocking purposes. Commanding officers are to request the Property and Evidence Unit to replace depleted supplies when appropriate.
- E. Any employee in the possession of contaminated equipment or items to be disposed of will bag the item(s) in orange or red plastic bags provided by the department. The outer bag will bear the markings "CONTAMINATED" AND "BIOHAZARD" WITH THE STANDARD BIOHAZARD SYMBOL. Double bag items when appropriate.
 - 1. Warning labels, including the orange or orange-red biohazard symbol, must be affixed to containers of regulated waste, refrigerators, freezers, and other containers which are used to store or transport blood or other potentially infectious materials.
 - 2. The commanding officer of the employee in possession of contaminated items to be disposed of, will ensure the materials are transported to the Public Health Department for disposal in accordance with federal, state, and local regulations.
- F. Personnel with motor vehicles requiring the clean-up of body fluids will use the contract car wash facility (Attachment A).

IV. Medical Care, Monitoring, and Reporting

- A. All personal wounds, regardless of the size, will be properly dressed and bandaged.
- B. Employee contact – Employees who believe they have been exposed to a body fluid or an airborne pathogen, will immediately contact the supervisor. The suspect or citizen suspected of exposing an employee to a possible infectious agent, should be advised to seek follow-up and consultation at the Public Health Department. The police department cannot require suspects or citizens to be tested except as provided in Section VI.
- C. The immediate supervisor of the reporting employee is responsible for utilizing the Employee Infectious Disease Exposure Report packets maintained by the

administrative assistant to document and report the incident. The instructions contained in the Infectious Disease Exposure Checklist will be followed.

- D. The reporting bureau will forward the Employee Infectious Disease Exposure Report to the designated officer in the Office of Support Services.
- E. The designated officer will cause follow-up measures to be taken, to include:
 - 1. A review of the report for completeness.
 - 2. A verification of the exposure status (actual exposure or not) based on provided information.
 - 3. Contacting the appropriate medical personnel to determine whether the employee was tested and if the results were forwarded to the City's health care provider.
 - 4. Contacting the affected employee(s) and directing them to receive the results of the medical report.
 - 5. Providing assistance with any follow-up or coordination of medical attention required.
 - 6. Maintaining files for each incident of exposure.
- F. A determination will be made after consultation with a physician, if the employee(s) will be permitted to continue normal duties. If the employee(s) is not permitted to work, he/she will be placed on appropriate leave.
- G. All information pertaining to employees with infectious diseases is considered confidential.
- H. Employees who test positive for tuberculosis will be referred for additional testing. An infectious person requires medication and cannot return to work until authorized to do so by the City physician.
- I. The department expects all employees to continue working relationships with any fellow employee recognized as having AIDS, HIV, HBC, HCV, or noncontagious tuberculosis. The department will consider appropriate corrective action against an employee who threatens or refuses to work with an infected employee, or who disrupts the work environment as a result of such actions.
- J. The department will provide all evaluations, procedures, vaccinations, and post-exposure management to the employee at a reasonable time and place, and according to standard recommendations for medical practice at the time of the incident.

V. Record Keeping

- A. The department will maintain accurate occupational health information for each employee for at least the duration of employment, plus 30 years.
- B. The department will keep all employee occupational health information confidential. The information is not to be released to any person within or without the workplace, except as required by law.
- C. The department will maintain training records for five years, in compliance with Section 29, Code of Federal Regulations, 1910.20.
- D. The Exposure Control Plan for Bloodborne Pathogens will be reviewed annually utilizing the OSHA Bloodborne Pathogen Compliance Checksheet. The Exposure Control Plan will be reviewed and updated as necessary to reflect significant changes in tasks and procedures by the designated officer.
- E. As required by OSHA Standards, Bloodborne Pathogens Section c. (v), the Exposure Control Plan must be made available to OSHA and NIOSH upon their request for examination and copying. The OSHA Bloodborne Pathogen Compliance Checksheet will be available from the designated officer.

VI. Testing of Source Persons for Bloodborne Pathogens

32.1-45.1 and 32.1-45.2 Code of Virginia provide for testing of source persons involved in a bloodborne pathogen exposure incident with public safety employees.

- A. Testing of source persons who deny consent
 - 1. Department personnel involved in an exposure incident who wish the source person (who does not consent) to be tested for HIV, HBV, or HCV under the provisions of the code above, will utilize the following petitions:
 - a) Petition to Require Blood Test – When the exposure is confirmed using the Bloodborne Pathogens Exposure Referral Worksheet. This petition (Attachment C) will be used most often; it is located: R:\Reference\Forms\Other Forms\Petition to Require Blood Test.
 - b) Petition To Test For Bloodborne Pathogens – When it is necessary to have the Court make a determination of exposure. It is available from the clerk of General District Court Civil Division; at the City Attorney's Office, and included in the Employee Infectious Disease Exposure Report.
 - 2. Seeking Court ordered testing

a) When court is not in session

The petitions will be completed as appropriate. The name of the current Director of the Health Department and the words "or designee" will be placed in the proper space. The petition will be turned over to the magistrate who will review and sign. The appropriate copy will be delivered to the respondent (source person). If the location of the source person is unknown, the magistrate should be requested to turn over the petition to the Sheriff's Office for service. In this instance, a subpoena request should be completed and given to the magistrate. The City Attorney's Office should be contacted and advised of the situation as soon as practical.

b) When court is in session

The petitions will be completed as appropriate and submitted to the clerk of General District Court and contact made with the Public Health Department. The petitions shall be issued by the clerk and served on the source person if in custody or location verified. If the location of the source person is unknown, the clerk of Court will submit it to the Sheriff's Office for service. In this instance, a completed subpoena request should be provided to the clerk.

c) Court compels testing

If the Court compels the source to have testing, the source can be taken back to jail (if in custody) and the sample drawn there if personnel are available. Follow procedures outlined below for testing of the sample. If the source person is not in custody, transport him/her to the contract testing facility and follow established procedures.

B. Testing of source persons who consent

1. Persons in custody

In most instances, the jail will facilitate drawing of blood upon request. When the vial is received, it should be placed in a Sharps Shuttle for transport to the testing facility. Complete a Petition to Require Blood Test (Attachment C) along with the blood sample. Contact the infection control office of the testing facility and advise that source patient testing has been ordered. The testing facility will contact the City's contract health care provider with the results. The health care provider will then provide additional counseling to the affected employee.

If the subject is being taken to an emergency room for treatment, contact the City's contract health care provider for advice on whether or not the

emergency room in question is equipped to facilitate appropriate source patient testing. The requesting employee will receive appropriate advice for the circumstances.

2. Persons not in custody

Transport the subject to the contract testing facility. Follow the testing procedure above, and transport the subject to any reasonable and appropriate location after testing is complete.

Related Documents:

1. G.O. ADM-330: Workers' Compensation
2. G.O. ADM-370: Leave
3. City of Norfolk Safety Manual, Blood Pathogen Exposure Control Plan

Attachments:

- A. Service Contracts for Bloodborne Pathogen Incidents
- B. Treatment Facilities
- C. Petition to Require Blood Test

Service Contracts for Bloodborne Pathogen Incidents

Laundry

Sanitary Linen Service, Inc., 2514 Hampton Boulevard, Norfolk. Phone: 757-627-2624.

Procedure:

1. Place the water soluble bag containing the garment(s) inside the biohazard barrier bag provided by Sanitary Linen personnel.
2. Sign the "Contaminated Laundry" tracking log.
3. Retrieve the garments upon receiving a phone call from Sanitary Linen Service, Inc. indicating the items are ready for pick-up.

Car Wash

SSS Express Car Wash, 908 E. Little Creek Rd., Norfolk. Phone: 757-587-5892.

1. Drive the vehicle to SSS Express Car Wash; see the attendant on site and request a "Bio" clean.
2. Advise the attendant of the nature and location of the contamination.
3. Upon receiving the vehicle after cleaning, inspect the area in question to be sure the contamination is not visible. If the contamination is still visible, advise the attendant to clean the area again.

Treatment Facilities

The following City approved facilities treat exposure incidents and other work-related injuries. The Now Care on-call pager/hotline number, for receiving immediate assistance, is 757-677-0007.

Location	Office Hours
Bayview Medical Center 7924 Chesapeake Blvd. Norfolk, VA 23518 757-587-1700	Monday–Friday: 8 a.m.–8 p.m. Saturday: 9 a.m.–3 p.m.
Sentara Walk-in Care 850 Kempsville Rd. Norfolk, VA 23502 757-261-5999	Monday–Friday: 8 a.m.–3:30 p.m.
Now Care Medical Center 6632 Indian River Rd. Virginia Beach, VA 23455 757-424-4300	Monday–Friday: 8 a.m.–8 p.m. Saturday: 9 a.m.–3 p.m. Sunday: 9 a.m.–3 p.m.
I&O Medical Centers 1290 Diamond Springs Road Virginia Beach, VA 23455 757-460-0700	Monday–Friday: 7:30 a.m.–7:30 p.m. Saturday: 9 a.m.–2:30 p.m. Sunday: 9 a.m.–2:30 p.m.
Taylor Made Diagnostics 801 Poindexter Drive, Suite 218 Chesapeake, VA 23324 757-494-1688	Monday–Friday: 8 a.m.–5 p.m.
Now Care Suffolk 2401 Godwin Blvd. Suffolk, VA 23434 757-923-5360	Monday–Friday: 8 a.m.–8 p.m. Saturday–Sunday: 8 a.m.–8 p.m.

PETITION TO REQUIRE BLOOD TEST

Commonwealth of Virginia Va. Code § 32.1-45.1

TO ANY AUTHORIZED OFFICER: You are commanded to summon the Respondent, and the Director of the

Health Department.

TO THE RESPONDENT: You are summoned to appear before this court at the above address on

to answer the Petitioner's claim

DATE AND TIME

DATE

☐ CLERK ☐ DEPUTY CLERK ☐ MAGISTRATE

☐ General District Court

☐ Juvenile and Domestic Relations District Court

In the Petitioner v., Respondent

The undersigned petitioner is:

- ☐ a health care provider or the employee of a health care provider as defined in Va. Code § 32.1-45.1(C) or (D) who has been directly exposed to the body fluids of a patient,
- ☐ a patient who has been directly exposed to the body fluids of a health care provider or employee of a health care provider as defined in Va. Code § 32.1-45.1(C) or (D),
- ☐ a law enforcement officer as defined in Va. Code § 32.1-45.1(G), salaried or volunteer firefighter, or salaried or volunteer emergency medical services provider who has been directly exposed to body fluids, or the exposed person's employer,
- ☐ a person who has been directly exposed to the body fluids of a law enforcement officer as defined in Va. Code § 32.1-45.1(G), salaried or volunteer firefighter, or salaried or volunteer emergency medical services provider,
- ☐ a school board employee as defined in 32.1-45.1(J) who has been directly exposed to body fluids, or the employee's employer,
- ☐ a person who has been directly exposed to the body fluids of a school board employee as defined in Va. Code § 32.1-45.1(J), and the person whose blood specimen is sought for testing for infection with human immunodeficiency virus or hepatitis B or C viruses and who is deemed to have consented to testing

☐ refuses to provide such specimen OR

☐ is a minor who refuses to provide such specimen and the minor's parent, guardian, or person standing in loco parentis also withholds consent for such specimen to be taken or is not reasonably available.

The undersigned petitions this court to order the person to provide a blood specimen or submit to testing and disclose the test results in accordance with the law. Testing for human immunodeficiency virus and hepatitis B and C viruses is requested.

Date and place of the alleged exposure:

Name and address of the individual whose blood specimen is sought for testing:

DATE

SIGNATURE OF PETITIONER

ORDER

☐ I find that the person whose blood specimen is sought for testing for infection with human immunodeficiency virus or hepatitis B or C viruses and who is deemed to have consented to such testing [] refuses to provide such specimen [] is a minor who refuses to provide such specimen and the minor's parent, guardian, or person standing in loco parentis also withholds consent for such specimen to be taken or is not reasonably available. THEREFORE, upon the advice of the Commissioner of Health or his designee, I order that the person provide a blood specimen or submit to testing and disclose the test results in accordance with Va. Code § 32.1-45.1 as requested in the petition. The test results shall be disclosed to the petitioner as soon as they are completed, and both the petitioner and respondent shall receive counseling and opportunity for face-to-face disclosure of any test results by a licensed practitioner or trained counselor.

- ☐ Respondent is ordered to appear at on at
for such testing.
- ☐ I order the petition dismissed.
- ☐ I order the record of this case to be sealed.

DATE

JUDGE

Court Case No.

Hearing date and time:

PETITION TO REQUIRE BLOOD TEST

PETITIONER

ADDRESS

v.

RESPONDENT

ADDRESS

ATTORNEY FOR THE PETITIONER

ATTORNEY FOR THE RESPONDENT

Serve:

DIRECTOR OF THE LOCAL HEALTH DEPARTMENT

ADDRESS

RETURNS: Each person was served according to law, as indicated below, unless not found.

NAME ADDRESS <input type="checkbox"/> PERSONAL SERVICE Tel. No. Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above. <input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> NOT FOUND for DATE	NAME ADDRESS <input type="checkbox"/> PERSONAL SERVICE Tel. No. Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above. <input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> NOT FOUND for DATE	NAME Director of the Health Department ADDRESS <input type="checkbox"/> PERSONAL SERVICE Tel. No. Being unable to make personal service, a copy was delivered in the following manner: <input type="checkbox"/> Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above. <input type="checkbox"/> Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.) <input type="checkbox"/> NOT FOUND for DATE
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